

This form can be found on-line at: http://www.ecy.wa-gov/pubs/ecy040114.doc

State of Washington JN 16 2005

G3-30488

Appl. No.:

For Ecology Use

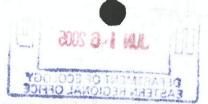
Fee Paid 6-16

Please follow the attached instructions to avoid uniferent of ECOLOGY.

Section 1. APPLICANT - PERSON, ORGANAME San W. Dashiell								
Mailing Address 6714 Dashiell RD.								
City_ Hunters								
Section 2. CONT		ERSON	TO CAL	L ABC	OUT THE A	APPL	ICATI	ON
Name								
Mailing Address					_ Work Tel:(_)_		
City	S	tate	Zip+4	+_	FAX:(_)_		
elationship to applican	it	1 1				_	10	
Section 3. STAT	permit to us	se not more	e than45	50		_(***	gallons pe	er minute or
I cubic feet per second f Domestic/Irr DESCRIPTION OF Thufficient.	igation/	Stocky	ator		. A	TTAC	HA"LE	GAL"
stimate a maximum an	nual quantity	to be use	d in acre-feet	per year:	150 acr	e-fee	et-per	-year
								e water will be need
Check if the water	use is propo	osed for a s		ject. Ind				
Check if the water From Section 4. WATI	use is propo	osed for a s	short-term pro	ject. Ind		d of tin		
From Section 4. WATI If SURFACE WATE Name the water source lake, etc. If unnamed,	ER SOUR	to e if stream,	short-term pro	if GRO	licate the perio	d of tin	ne that the	e water will be need
From Section 4. WATI If SURFACE WATE Name the water source lake, etc. If unnamed, stream," etc.:	ER SOUR and indicate write "unnan	to e if stream,	short-term pro	if GRO	DUNDWATE	d of tin	ne that the	e water will be need
From Section 4. WATI If SURFACE WATE Name the water source lake, etc. If unnamed, stream," etc.: Number of diversions: Source flows into (name)	ER SOUR and indicate write "unnan	to	short-term pro	If GRO	DUNDWATE	d of tin	ne that the	rell(s).
Check if the water	ER SOUR and indicate write "unnan	to	short-term pro	If GRO	DUNDWATE nit is desired for depth of well(d of tin	ne that the	rell(s).
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Section 4. WATI Section 4. WATI If SURFACE WATE Name the water source lake, etc. If unnamed, stream," etc.: Number of diversions: Source flows into (name) LOCATION Enter the north-south section corner: 1320 4 of 4 of 5 SE	ER SOUF R and indicate write "unnant of body of and east-we of body of section Section	to to RCE e if stream, ned spring water): est distance 1980 Township 30N	short-term pro	If GRO A perm Size &	DUNDWATE out is desired for the south of diverse Southea County	cR s): 1 eet lion or st co	withdraverner Station of sou	rell(s). n 50 to val to the nearest Sec. 5 arce is platted, complete below:

APPLICATION

ECY 040-1-14 Rev. 7/97 * * f



Section 5. GENERAL WATER SYSTEM INFORMATION

	Name of system, if named:	
В.	Briefly describe your proposed water system. (See instructions.) The domestic one home that may or may not be constructed in the future would be low presure pivot system of all new constution system would be for a rotational grazing program to helpwater.	re. The irrigation
C.	Do you already have any water rights or claims associated with this property or system? PROVIDE DOCUMENTATION. This source is very unreliable an available in July and August.	nd usualy not
	ction 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFOI completed for all domestic/public supply uses.)	RMATION
A .	Number of "connections" requested:1 Type of connection _Home	
	(Homes, Apar	tment, Recreational, etc.)
3.	Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water system County Health Department.	☐ YES 🔯 NO ns are identified by your
Com	aplete C. and D. only if the proposed water system will have fifteen or mor	re connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health?	□ YES □ NO
	If yes, when was it approved? Please attach the current approved vers	sion of your plan.
	If yes, when was it approved? Please attach the current approved vers	sion of your plan.
Э.	Do you have an approved conservation plan? If yes, when was it approved conservation plan? Please attach the current approved versus approved versus approved versus approved versus approved.	□ YES □ NO
Sec	Do you have an approved conservation plan?	☐ YES ☐ NO sion of your plan.
Sec (Ca	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved versetion 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION	☐ YES ☐ NO sion of your plan.
Sec (Ca	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved verse etion 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION complete for all irrigation and agriculture uses.) Total number of acres to be irrigated:60 List total number of acres for other specified agricultural uses:	☐ YES ☐ NO sion of your plan.
Sec (Co	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved verse etion 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION complete for all irrigation and agriculture uses.) Total number of acres to be irrigated:60 List total number of acres for other specified agricultural uses: Use stockwater Acres_60	☐ YES ☐ NO sion of your plan.
Sec (Co	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved verse extraction 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION complete for all irrigation and agriculture uses.) Total number of acres to be irrigated:60 List total number of acres for other specified agricultural uses: Use stockwater Acres60 Use Acres	☐ YES ☐ NO sion of your plan.
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Sec. (Co	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved versetion 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION complete for all irrigation and agriculture uses.) Total number of acres to be irrigated: 60 List total number of acres for other specified agricultural uses: Use Stockwater Acres	□ YES □ NO sion of your plan. pter 237, Laws of 2001)
Sec (Co	Do you have an approved conservation plan? If yes, when was it approved?	□ YES □ NO sion of your plan. pter 237, Laws of 2001)
Sec (Co	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved verse proposed to be irrigated agriculture uses.) Total number of acres to be irrigated: Acres List total number of acres for other specified agricultural uses: Use Acres Acres Lise Acres Lise Acres Lise Acres Lise Acres Lise Acres Lise Acres	□ YES □ NO sion of your plan. pter 237, Laws of 2001) □ YES □ NO □ YES □ NO □ YES □ NO

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☐ YES KKNO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site. From Hunters, drive East on the Hunters-Springdale Road 1 mile to the Henderson Road, turn No h and drive 1/3 mile, open gate on the left and follow jeep trail 1980 ft. to proposed well site. Fields to be irrigated are to the south.

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

Section 11. PROPERTY OWNERSHIP

A.	Does the applicant own the land on which the water will be If no, explain the applicant's interest in the place of use and		The state of the s	mer(s)
	if no, explain the applicant's interest in the place of use and	provide the name(s) and addi-	ess(es) of the ev	1101(0).
			7	2.5
B.	Does the applicant own the land on which the water source if no, submit a copy of agreement:	s located?	XN YES	□ NO
to pr moni	tify that the information above is true and accurate to the boocess my application, I grant staff from the Department of I toring purposes. Even though I may have been assisted in toyees of the Department of Ecology, all responsibility for the	Ecology access to the site for the preparation of the above	inspection and application by	the
	S.W. Jely	6-10-2005		
Appli	cant (or authorized representative)	Date		
	Same	C. C. C. D.		
Lando	owner for place of use (if same as applicant, write "same")	Date		

We are returning your application for the following r	reason(s):	
Examination fee was not enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s)incomplete	is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:		
Please provide the additional information requested (do	above and return your appate).	plication by
Scology staff_	Date	

Use this page to continue your answers to any questions on the application. Please indicate section

number before answer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

Ecology is an Equal Opportunity and Affirmative Action employer.